## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

09734882

| •                                                                        |                      | CLAIMS A                                                       | S FILED -        | PART                          | 1                            |                   | SMALL E      | YTITY                  | 7:    | OTHER               | THAN                   | 10 10 <b>100</b> |
|--------------------------------------------------------------------------|----------------------|----------------------------------------------------------------|------------------|-------------------------------|------------------------------|-------------------|--------------|------------------------|-------|---------------------|------------------------|------------------|
|                                                                          |                      |                                                                | (Column          | 1)                            | (Colu                        | mn 2)             | TYPE [       |                        | OR    | SMALL               |                        |                  |
| TOTAL CLAIMS                                                             |                      |                                                                |                  |                               |                              | 1                 | RATE         | FEE                    | ]-    | RATE                | FEE                    | 1                |
| FOR                                                                      |                      |                                                                | NUMBER           | FILED                         | NUMB                         | ER EXTRA          | BASIC FEE    | 355.00                 | OR    | BASIC FEE           | 710.00                 |                  |
| TOTAL CHARGEABLE CLAIMS                                                  |                      |                                                                | 12 mir           | us 20=                        | •                            |                   | X\$ 9=       |                        | OR    | X\$18=              |                        | 1                |
| IN                                                                       | DEPENDENT CL         | minus 3 =                                                      |                  |                               |                              | X40=              |              | OR                     | X80=  |                     |                        |                  |
| MULTIPLE DEPENDENT CLAIM PRESENT                                         |                      |                                                                |                  |                               |                              | +135=             | 11-21-24-2-1 | OR                     | +270= |                     |                        |                  |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |                      |                                                                |                  |                               |                              | TOTAL             |              | OR                     | TOTAL |                     |                        |                  |
|                                                                          | C                    | LAIMS AS A                                                     | MENDED           | - PAR                         | TII                          |                   |              |                        | 1011  | OTHER               | THAN                   | 1                |
|                                                                          |                      | (Column 1)                                                     | -v2-v7-v         | (Colu                         |                              | (Column 3)        | SMALL        | ENTITY                 | OR    | SMALL               |                        |                  |
| AMENDMENT A                                                              |                      | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                      |                  | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY                 | PRESENT<br>EXTRA  | RATE         | ADDI-<br>TIONAL<br>FEE |       | RATE                | ADDI-<br>TIONAL<br>FEE |                  |
| NON                                                                      | Total                | . /2                                                           | Minus            | ** <                          | 20                           | =                 | X\$ 9=       |                        | OR    | X\$18=              |                        |                  |
| AME                                                                      | Independent          | . 6                                                            | Minus            | ***                           | 6                            | = /               | X40=         |                        | OR    | X80=                |                        |                  |
|                                                                          | FIRST PRESE          | NTATION OF M                                                   | ULTIPLE DEF      | ENDEN                         | CLAIM                        |                   | +135=        |                        | OR    | +270=               |                        |                  |
|                                                                          |                      |                                                                |                  |                               |                              | •                 | TOTAL        |                        |       | TOTAL<br>ADDIT: FEE | grand in               | •                |
|                                                                          | •                    | (Column 1)                                                     |                  | (Colu                         | mn 2)                        | (Column 3)        | ADDIT. FEE   |                        |       | ADDIT: FEE!         |                        | 1                |
|                                                                          |                      | CLAIMS                                                         |                  | HIGH                          |                              | (Column c)        |              | ADDI-                  | 1     |                     | ADDI                   | ł                |
| AMENDMENT B                                                              |                      | REMAINING<br>AFTER<br>AMENDMENT                                |                  | _                             | IBER<br>OUSLY<br>FOR         | PRESENT<br>EXTRA  | RATE         | TIONAL<br>FEE          |       | RATE                | ADDI-<br>TIONAL<br>FEE |                  |
|                                                                          | Total                | • //                                                           | Minus            | ** 2                          | 10                           | =                 | X\$ 9=       |                        | OR    | X\$18=              |                        |                  |
| AME                                                                      | Independent          | . 6                                                            | Minus            | ***                           | 6                            | = /               | X40=         |                        | OR    | X80=                |                        |                  |
| <u></u>                                                                  | FINST PHESE          | NTATION OF MI                                                  | OLTIPLE DEF      | ENDEN                         | CLAIM                        |                   | +135=        |                        | OR    | +270=               |                        | 1                |
|                                                                          |                      |                                                                |                  |                               |                              |                   | TOTAL        |                        | •     | TOTAL               |                        | ł                |
|                                                                          |                      |                                                                |                  |                               |                              |                   | ADDIT. FEE   |                        | OR    | ADDIT. FEE          |                        | 4                |
|                                                                          |                      | (Column 1)                                                     |                  |                               | mn 2)                        | (Column 3)        |              |                        | _     |                     |                        |                  |
| AMENDMENT C                                                              |                      | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                      |                  | NUM<br>PREVI                  | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA  | RATE         | ADDI-<br>TIONAL<br>FEE |       | RATE                | ADDI-<br>TIONAL<br>FEE |                  |
| NON                                                                      | Total                | . //                                                           | Minus            | · ر                           | 20                           | =                 | X\$ 9=       |                        | OR    | X\$18=              |                        | 1                |
| AME                                                                      | Independent          | . 6                                                            | Minus            | ***                           | 6                            | = (               | X40=         |                        | OR    | X80=                |                        | 1                |
| L                                                                        | FIRST PRESE          | NTATION OF M                                                   | ULTIPLE DEI      | PENDEN                        | T CLAIM                      |                   |              |                        |       |                     |                        | 1                |
|                                                                          |                      |                                                                |                  |                               |                              |                   | +135=        |                        | OR    | +270=               |                        | II.              |
|                                                                          | If the entry in colu | mn 1 is less than t                                            | he entry in colu | ımn 2, writ                   | e "0" in co                  | lumn 3.           |              |                        | 011   |                     |                        | 4                |
| ••                                                                       | If the "Highest Nu   | mn 1 is less than t<br>mber Previously P<br>Imber Previously P | aid For IN THI   | S SPACE                       | is less tha                  | n 20, enter "20." | TOTAL        |                        | OB    | TOTAL<br>ADDIT. FEE |                        |                  |